

| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | <i>9/10</i> |
| FORMALITY REVIEW | <i>17</i> | <i>817</i> | <i>12-18-00</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

| Claim | Final Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here